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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number 10/044368		
	umn 2)	SMALL ENTITY			OR	OTHER THAN SMALL ENTITY					
-	FOR	NUMBI	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))		c)) 1	N/A		N/A		N/A	•		N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))		Ι",	N/A		N/A		N/A			N/A	
EXA	MINATION FEE FR 1.16(0), (p), or (N/A		N/A	Ì	N/A			N/A	
	AL CLAIMS CFR 1.16(i))		minus 20 = *				x =		OR	x =	
INDI	EPENDENT CLA CFR 1.16(h))	IMS	minus 3 = *				x =]	х =	
APP FEE	LICATION SIZE	sheets of is \$250 (\$ additiona	If the specification and drawings e sheets of paper, the application si is \$250 (\$125 for small entity) for additional 50 sheets or fraction the 35 U.S.C. 41(a)(1)(G) and 37 CFF				***				
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							N/A			N/A	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
	APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL E	ENTITY	OR 1	OTHER SMALL	
ΨŢ		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
AMENDMENT	Total (37 CFR 1.16(i))	[•] 69	Minus	47	⁼ 22		× 25 =		OR	x 50 =	1100
QN	Independent (37 CFR 1.16(h))	` 4	Minus	··· 4	= 0		x 100=		OR	x 200 =	
ME	Application Size Fee (37 CFR 1.16(s))								1		
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						N/A		OR	N/A	
厂							TOTAL ADD'L FEE		OR .	TOTAL ADD'L FEE	1100
1											
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	<u></u>	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	*	Minus	**	=	1	x 25 =	•	OR .	x 50 =	
	Independent (37 CFR 1.16(h))	*	Minus	***	2		× 100=		OR	x 200 =	
	Application Size Fee (37 CFR 1.16(s))							i	1 ~~		
l [₹]	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))						N/A		OR	N/A	
Please charge any additional fees or credit overpayment to Deposit Account No. 50-0413.									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the 'Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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